

## **Federal Requirement**

*The resident has the right to be free from any physical or chemical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms. 42 CFR 483.13 (a)*

### ***Resident Rights***

- The Resident and family have the right to participate in the assessment and development of the care plan.
- The Resident (and/or their legal decision-maker) has the right to accept or refuse recommended treatment; however, they may not order treatment (e.g. the use of a restraint.)

### ***Facility Responsibility***

- The Facility conducts comprehensive assessments and develops care plans.
- The Facility identifies resident needs and considers the least restrictive treatment interventions.

### ***Definition of a Physical Restraint***

**... Any manual method or physical or mechanical device, material or equipment attached or adjacent to the resident's body that the resident cannot easily remove and that restricts freedom of movement or normal access to his/her body e.g., vests, lap trays/cushions, side rails, etc.**

### ***Risks of Restraint Use***

- **Death**
- **Serious Injury**
- **Confusion**
- **Incontinence/ Skin Breakdown**
- **Depression / Low Self Esteem**
- **Embarrassment**
- **Loss of Strength**
- **Loss of Mobility Skills**

### ***Assessment & Care Planning***

An in-depth assessment of the resident means identifying his or her mental and physical needs and the complications and risk factors which affect care plan decisions. Providing care through use of alternative measures rather than restraint devices is a more dignified, comfortable and safe treatment approach in addressing the needs of the resident.

### ***Alternative Interventions***

Physical restraints are sometimes used to protect the individual from harm due to falls, wandering and agitated behaviors. Recent research indicates that physical restraints are neither the most effective nor the safest intervention. There are alternative interventions that may be used to treat a resident's medical symptom instead of physical restraints.

### ***Alternative Interventions***

- **Fall Prevention Program**
- **Bladder Retraining Program**
- **Responsiveness to Needs**
- **Ambulation Programs**
- **Individualized Activities**
- **Alarms and Monitors**
- **Environment Modifications**
  - Reduce Clutter**
  - Comfortable Chairs**
  - Low Beds**
  - Fall Mats**
  - Nonskid Cushions/Pads**

These alternative interventions (...and there are many more) are being successfully used in many restraint reduction programs.

### ***Become Involved***

You can help improve the resident's quality of life by providing staff information about the resident's habits and lifestyle and becoming involved in the care planning process.

**Inform staff about concerns you might have and inquire how you can become involved in the assessment and care planning process.**

**If you have any questions,  
Please contact at this facility:**

**Name:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

**Extension:** \_\_\_\_\_

**Family Resources**

**Executive Office of Elder Affairs  
Long Term Care – Ombudsman Program  
Boston, MA  
1-800-882-2003**

**Department of Public Health  
Division of Health Care Quality  
Boston, MA  
(617) 753-8220**

**Facility Resources**

**We are proud to share our success stories with you!**

**Catholic Memorial Home  
Fall River, MA  
(508) 679-0011**

**Country Estates of Agawam  
Agawam, MA  
(413) 789-2200**

**Maristhill Nursing and  
Rehabilitation Center  
Waltham, MA  
(781) 893-0240**

**The Nevins Nursing and Rehabilitation Ctr.  
Methuen, MA  
(978) 682-7611**

**Tewksbury Hospital  
Tewksbury, MA  
(978) 851-7321**

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# **Physical Restraints A Resource Guide**

*Developed by the*

## **Massachusetts Restraint Reduction Task Force**

*Sponsored by*

**Health Care Financing Administration–Region I  
Massachusetts Department of Public Health  
Massachusetts Department of Elder Affairs**

*with support from the*

**Massachusetts Extended Care Federation**